

CLAIMS ONLY						Application Number 10808649	Filing Date					
						Applicant(s)						
* May be used for additional claims or amendments												
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		Indep	Depend	Indep	Depend	Indep	Depend
	Indep	Depend	Indep	Depend	Indep	Depend						
1	1					51						
2		1				52						
3			1			53						
4				1		54						
5					1	55						
6						56						
7						57						
8						58						
9						59						
10						60						
11	1					61						
12		1				62						
13	1					63						
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43						93						
44						94						
45						95						
46						96						
47						97						
48						98						
49						99						
50						100						
Total Indep	3					Total Indep						
Total Depend	10	←	←	←	←	Total Depend	←	←	←	←		
Total Claims	13					Total Claims						